



STATE OF CONNECTICUT  
OFFICE OF THE STATE TREASURER

**Unclaimed Property Division**  
**Holder Reporting Extension Request Form**  
**Calendar Year Ending December 31, 2013**

We are requesting an extension for:

- ☐ Filing the Report of Unclaimed Property for the year 2013, representing property considered legally abandoned as of December 31, 2013 and due on or before March 31, 2014. **No money is due at this time.** Your payment **MUST** accompany your holder report.

**Note: Extensions will NOT be granted because due diligence was not completed in a timely manner as per CT statutes or reporting instructions.**

Based on the reason(s) below, I am applying for an extension:

	<u>Yes</u>	<u>No</u>
Reorganization/Merger	<input type="checkbox"/>	<input type="checkbox"/>
Personnel Changes	<input type="checkbox"/>	<input type="checkbox"/>
New Accounting System	<input type="checkbox"/>	<input type="checkbox"/>
System Problem	<input type="checkbox"/>	<input type="checkbox"/>
Change in Transfer Agent	<input type="checkbox"/>	<input type="checkbox"/>
Other (Please Explain) _____	<input type="checkbox"/>	<input type="checkbox"/>

I am requesting the following additional time to complete the report:

10 Days ☐      30 Days ☐      45 Days ☐      60 Days ☐

I have verified due diligence has been completed for the property in question. I am duly authorized to execute this request for an extension on behalf of the holder.

**Please complete one form for each entity or company.**

Holder Name: \_\_\_\_\_

FEIN#: \_\_\_\_\_

Date of Request: \_\_\_\_\_

Name of Signatory: \_\_\_\_\_ Title: \_\_\_\_\_

Telephone #: \_\_\_\_\_ E-mail: \_\_\_\_\_ Fax No: \_\_\_\_\_

Signature: \_\_\_\_\_

**TREASURER'S OFFICE USE ONLY**

The State of Connecticut's Unclaimed Property Division will consider the following criteria in evaluating the request.

	<u>Yes</u>	<u>No</u>	<u>Explain/Notes</u>	<b>Holder Report #</b>
Company Previously Filed Holder Reports	<input type="checkbox"/>	<input type="checkbox"/>		_____
Never Filed with CT before	<input type="checkbox"/>	<input type="checkbox"/>		
Holder Reports Received Timely(3 yrs)	<input type="checkbox"/>	<input type="checkbox"/>		
Previous Extension Requests (Consecutive)	<input type="checkbox"/>	<input type="checkbox"/>		

Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

Maria M. Greenslade, Assistant Deputy Treasurer

**Extension Approved** ☐      **Report will be due on:** \_\_\_\_\_

**Extension Denied** ☐      **Explanation:** \_\_\_\_\_